PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10030290-1

CLAIMS AS FILED - PART I							_	SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Column 2)		T	TYPE		OR	SMALL	ENTITY
· · ·			<u> </u>					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	[BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			28 minus 20=		* 8			X\$ 9=		OR	X\$18=	144
INDEPENDENT CLAIMS			minus 3 =					X42=	<u> </u>	OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				Ī	+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in			olumn 2	L	TOTAL		OR	TOTAL	894
CLAIMS AS AMENDED - PART II								!		1	OTHER	THAN
		(Column 1)	(Column 2			(Column 3) SMALL			ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* INTATION OF M	Minus	***		=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	INTATION OF M	ULTIPLE DE	PENDENI	CLAIM			+140=		OR	+280=	,
							L	TOTAL			TOTAL	
		(Column 1)		(Colur	mn 2\	(Column 3)	Α	DDIT. FEE		1011	addit. Fee	
		CLAIMS		HIGH	IEST		lr		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
							L	+140=		OR	+280=	
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	IPLE DEPENDENT			J ├			OR	7.0 /-	
* *	If the entry is well-	oon t la lana the - t	no onto de est		. MAR !	·	İ	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
A ##	The Highest Nu	imber Previously P nber Previously Pa	aıɑ ⊢or″ IN TH id For" (Total o	r Independ	is less tha ent) is the	in 3, enter "3." highest numbe			ropriate box			